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CONFIRMATION NO. 6593

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10/808,758		435	1648	5410-006 (312552-24)

APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/459,000 03/28/2003
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**** FOREIGN APPLICATIONS *******

UNITED STATES OF AMERICA PCT/US03/02295 01/24/2003

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****

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Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Verified and /BENJAMIN P BLUMEL/ Acknowledged Examiner's Signature		Initials	CA	35	48	3

ADDRESS

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TITLE

Adenovirus particles with enhanced infectivity of dendritic cells and particles with decreased infectivity of hepatocytes

FILING FEE RECEIVED 1404	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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